FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# OMB APPROVAL OMB Number: Expires:

Estimated average burden hours per response ......

## FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC US	E ONLY
Prefix	Serial
DATE R	ECEIVED
1	

Name of Offering ( check if this is an an	changed, and	l indicate o	change.)	866							
Walton Street Real Estate Partners VI-NGE, L.P.						Mall Processing					
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 50	)5 ☑ Rule 50	6 □ Sect	ion 4(6) 🗆 UL0	OE	Section					
Type of Filing: ☑ New Filing [] Amenda	ment										
	A. BAS	IC IDENTIF	ICATIO	N DATA		AUG 0 6 2008					
1. Enter the information requested about the	ne issuer										
Name of Issuer ( check if this is an ame	ndment and name has c	hanged, and i	ndicate ch	ange.)		Washington, DC					
Walton Street Real Estate Partners VI-	NGE, L.P.					103					
Address of Executive Offices	(Nu	mber and Stro	eet, City, S	tate, Zip Code)	Telephone N	umber (Including Area Code)					
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611						(312) 915-2800					
Address of Principal Business Operations	(Nu	mber and Stre	eet, City, S	tate, Zip Code)	Telephone N	umber (Including Area Code)					
(if different from Executive Offices)					<u> </u>						
Brief Description of Business					3						
Real Estate Investments						PROCESSED					
Type of Business Organization						AUG 1 9 2000					
☐ corporation	☑ limited partnership,	, already form	ied	other (	(please specify)	E AUG 132008					
☐ business trust	☐ limited partnership,	, to be formed	l <u></u>			TUOMON DEUTEDE					
		Month	Year		•	THOMSON REUTERS					
			╻╸	☑ Actual □	Estimated						
Actual or Estimated Date of Incorporation	or Organization:	0 7	0 8	e Acidai 🗆	Pattilaton						
Jurisdiction of Incorporation or Organizati	on:	(Enter two-letter U.S. Postal Service abbreviation for State:									
	CN for Car	CN for Canada: EN for other foreign jurisdiction)									

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
• `Each promoter of the issuer, if the issuer has been organized within the past five years;									
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of issuer;</li> </ul>	the								
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply:	tner								
Full Name (Last name first, if individual)									
Walton Street Managers VI, L.P.	_								
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply:	tner								
Full Name (Last name first, if individual).									
Walton Street Capital, L.L.C.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply:	tner								
Full Name (Last name first, if individual)									
Bluhm, Neil G.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Part	tner								
Full Name (Last name first, if individual)									
Schulman, Ira J.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Part	tner								
Full Name (Last name first, if individual)									
Mogentale, Eric C.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply:	tner								
Full Name (Last name first, if individual)									
Weaver, K. Jay									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									
Check Box(es) that Apply:	tner								
Full Name (Last name first, if individual)									
Quicksilver, Jeffrey S.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
900 North Michigan Avenue, Suite 1900, Chicago, Illinois 60611									

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			·		В. І	NFORMA	TION AB	OUT OFF	ERING			<u> </u>	<del></del>	
												-	Yes	No
1.	Has the	issuer sole	d, or does t	he issuer ir	ntend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?			🗆	☑
<ol> <li>Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?</li> <li>Answer also in Appendix, Column 2, if filing under ULOE</li> </ol>														
What is the minimum investment that will be accepted from any individual?(subject to a reduction under certain circumstances at discretion of general partner)									<b>\$ 10,000,000</b>					
													Yes	No
		-				-								
	similar is an ass broker o	remunerati sociated pe or dealer.	on for soli- erson or ag- If more tha	citation of ent of a bro	purchasers oker or dea persons to	s in connect der register	tion with s ed with the	ales of seco e SEC and/	urities in th or with a s	e offering. tate or state	. If a perso es, list the	commission on to be liste name of the nay set forth	ed :	
Full Name	(Last n	ame first, i	f individu	al)										
N/A														
Business of	or Reside	ence Addro	ess (Numbe	er and Stre	et, City, St	ate, Zip Co	ode)							
Name of A	Associate	ed Broker	or Dealer											
States in V	Which Pe	erson Liste	d Has Soli	cited or Int	ends to So	olicit Purch	asers							
(Che	ck "All S	States" or	check indi	vidual State	es)							🗆 A	ll States	
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	[R.I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name		ame first, i		al)										
Business of	or Reside	ence Addre	ess (Numbe	er and Stre	et, City, St	ate, Zip Co	ode)							
Name of A	Associate	ed Broker	or Dealer											
States in V	1/high Da	reon Liete	d Hee Sali	cited or Int	ends to So	licit Purch	cert					<del>-</del>	<u></u>	
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Full Name			<u> </u>		[17]	[OI]	[ • • 1	[,,,]	[,,,,]	[,,,]		[]	[, , ,	
Business of	or Reside	ence Addre	ess (l\umbo	er and Stre	et, City, St	ate, Zip Co	ode)					· <del></del>		
Name of A	Associate	ed Broker	or Dealer		<del>. ,</del>									
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate	A	mount Already
		Offering Price		Sold
	Debt	<u>\$ -0-</u>	<u>\$</u>	-0-
	Equity	\$ -0-	<u>\$</u>	-0-
	□ Common □ Preferred			
	Convertible Securities (including warrants)	<b>s</b> -0-	\$	-0-
	Partnership Interests		<u> </u>	-0-
	Other (Specify) Limited Partnership Interests *(to be apportioned between related parallel funds)			50,000,000
	Total *(to be apportioned between related parallel funds)			50,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
				Aggregate
		Number	J	Dollar Amount
		Investors		of Purchases
	Accredited Investors	1	<u>s</u>	50,000,000
	Non-accredited Investors	-0-	<u>\$</u>	-0-
	Total (for filings under Rule 504 only)	<u>N/A</u>	<u>\$</u>	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering	Type of	]	Dollar Amount
		Security		Sold
	Rule 505		\$	
	Regulation A		<u>s</u>	
	Rules 504		<u>s</u>	
	Total		<u>s</u>	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	☑	<u>\$</u> _	-0-
	Printing and Engraving Costs *(to be apportioned between related parallel funds)			*60,000
	Legal Fees *(to be apportioned between related parallel funds)			*600,000
	Accounting Fees			-0-
	Engineering Fees			-0-
	Sales Commissions (specify finders' fees separately)			-0-
	Other Expenses (identify) Syndication/Marketing/Travel *(to be apportioned between related parallel fi			*180,000
	Total *(to be apportioned between related parallel funds)			
	· · · · · · · · · · · · · · · · · · ·			

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